

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

HealthSouth Corporation Political Action Committee

ADDRESS (number and street)

3660 Grandview Parkway, Suite 200

☐Check if different  
than previously  
reported. (ACC)

Birmingham

AL

35243

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00414649

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

10

16

2008

through

11

24

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Edmund M. Fay

Signature of Treasurer

Electronically Filed by Edmund M. Fay

Date

12

04

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
HealthSouth Corporation Political Action Committee

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		4822.14
(b) Cash on Hand at Beginning of Reporting Period .....	7585.84	
(c) Total Receipts (from Line 19) .....	7641.83	63995.53
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	15227.67	68817.67
7. Total Disbursements (from Line 31) .....	4510.00	58100.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	10717.67	10717.67
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

HealthSouth Corporation Political Action Committee

Report Covering the Period:

From:

M M  
1 0D D  
1 6Y Y Y Y  
2 0 0 8

To:

M M  
1 1D D  
2 4Y Y Y Y  
2 0 0 8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	6652.76	46861.16
(i) Itemized (use Schedule A) .....	989.07	17134.37
(ii) Unitemized .....	7641.83	63995.53
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	7641.83	63995.53
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	7641.83	63995.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	7641.83	63995.53

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	10.00	100.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	10.00	100.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4500.00	58000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4510.00	58100.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4510.00	58100.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	7641.83	63995.53
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7641.83	63995.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	10.00	100.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	10.00	100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

James A. Allen

Mailing Address 436 Golf Drive

City

Hoover

State

AL

Zip Code

35226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

VP Operations Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9044

Amount of Each Receipt this Period

93.00

Payroll Deduction (\$31,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

Thomas Almerico

Mailing Address 10154 S Bannor Hill Road

City

Sandy

State

UT

Zip Code

84092

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9019

Amount of Each Receipt this Period

45.00

Payroll Deduction (\$15,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

Christine Bachrach

Mailing Address 3725 Dunbarton Drive

City

Mountain Brook

State

AL

Zip Code

35223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

SVP Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9047

Amount of Each Receipt this Period

75.00

Payroll Deduction (\$25,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

213.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Russell A. Bailey

Mailing Address 58 Edgemire Place

City

The Woodlands

State

TX

Zip Code

77381

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9048

Amount of Each Receipt this Period

300.00

Payroll Deduction (\$100, 2  
weeks)

**B.**

Full Name (Last, First, Middle Initial)

Tony Bennett

Mailing Address 3108 Preserve Rookery Blvd

City

Panama City Beach

State

FL

Zip Code

32408

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9050

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

David Berry

Mailing Address 175 Central Street

City

North Reading

State

MA

Zip Code

01864

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Regional Director of Managed Care

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9051

Amount of Each Receipt this Period

60.00

Payroll Deduction (\$20,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

390.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Jeffrey P. Blackwood

Mailing Address 276 Stonebridge Road

City

Birmingham

State

AL

Zip Code

35210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Director of Design &amp; Construction

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9052

Amount of Each Receipt this Period

57.00

Payroll Deduction (\$19,  
2 weeks)

B.

Full Name (Last, First, Middle Initial)

Michael L. Bullitt

Mailing Address 3711 Kessler

City

Wichita Falls

State

TX

Zip Code

76309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9022

Amount of Each Receipt this Period

36.00

Payroll Deduction (\$12,  
2 weeks)

C.

Full Name (Last, First, Middle Initial)

Charles Richard Byrd, III

Mailing Address 3609 Ridgcrest Road

City

Birmingham

State

AL

Zip Code

35223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

VP Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9057

Amount of Each Receipt this Period

72.00

Payroll Deduction (\$24,  
2 weeks)

SUBTOTAL of Receipts This Page (optional) .....

165.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Randall Carpenter

Mailing Address 3754 Carisbrooke Drive

City State Zip Code  
 Hoover AL 35226

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HealthSouth Corporation

Occupation  
Chief Information Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9059

Amount of Each Receipt this Period

120.00

Payroll Deduction (\$40,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

Dr. Dexanne B. Clohan

Mailing Address 2351 River Grand Drive

City State Zip Code  
 Birmingham AL 35243

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HealthSouth Corporation

Occupation  
Chief Medical Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4416.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9060

Amount of Each Receipt this Period

576.00

Payroll Deduction (\$192, 2  
weeks)

**C.**

Full Name (Last, First, Middle Initial)

Kevin R. Conn

Mailing Address 10456 N.W. 48th Manor

City State Zip Code  
 Coral Springs FL 33076

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HealthSouth Corporation

Occupation  
Vice President - Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9061

Amount of Each Receipt this Period

60.00

Payroll Deduction (\$20,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

756.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Michelle Lee Culhane

Mailing Address 3508 Cold Harbor Lane

City

Birmingham

State

AL

Zip Code

35223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Director of Risk Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9063

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

Kristen DeHart

Mailing Address 1542 Canterbury Lane

City

Liberty

State

MO

Zip Code

64068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9064

Amount of Each Receipt this Period

60.00

Payroll Deduction (\$20,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

Catherine V. Devaney

Mailing Address 19 Buckingham Drive

City

Bow

State

NH

Zip Code

03304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9065

Amount of Each Receipt this Period

45.00

Payroll Deduction (\$15,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

135.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Elaine Ebaugh

Mailing Address 4331 38th Way S.

City

St. Petersburg

State

FL

Zip Code

33711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9023

Amount of Each Receipt this Period

60.00

Payroll Deduction (\$20,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

Danny Edwards

Mailing Address 1112 Hunt Club Lane

City

Valrico

State

FL

Zip Code

33594

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9024

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

Laurie English

Mailing Address 904 Emerald Boulevard

City

Southlake

State

TX

Zip Code

76902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

SVP Inpatient Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1725.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9068

Amount of Each Receipt this Period

225.00

Payroll deduction (\$75,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

315.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Daniel A. Eppley

Mailing Address 5236 Manorwood Drive

City

Sarasota

State

FL

Zip Code

34235

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9025

Amount of Each Receipt this Period

60.00

Payroll Deduction (\$20,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

Edmund M. Fay

Mailing Address 527 Valley Road

City

Birmingham

State

AL

Zip Code

35206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

SVP Treasury

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9069

Amount of Each Receipt this Period

180.00

Payroll Deduction (\$60,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

Scott A. Filler

Mailing Address 400 Ruskin Drive

City

Altoona

State

PA

Zip Code

16602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9071

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

270.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Denice Gaffney

Mailing Address 91 Parker Avenue

City

Manasquan

State

NJ

Zip Code

08736

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Director of Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9072

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

Brenda Gosney

Mailing Address 968 Nagel Road

City

Butler

State

KY

Zip Code

41006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9027

Amount of Each Receipt this Period

60.00

Payroll Deduction (\$20,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

Jerry Gray

Mailing Address 7130 East Saddleback Street  
Apt. 56

City

Mesa

State

AZ

Zip Code

85207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

SVP Inpatient Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2538.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9073

Amount of Each Receipt this Period

168.00

Payroll Deduction (\$56,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

258.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Wayne Hegwood

Mailing Address 2356 Altadena Crest Drive

City

Birmingham

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Director of Special Projects

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9075

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

Rebecca Holmes

Mailing Address 115 Breeze Ridge

City

Narrows

State

VA

Zip Code

24124

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Director of Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9076

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

William House

Mailing Address 1739 Lake Cyrus Club Drive

City

Hoover

State

AL

Zip Code

35244

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Regional Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

621.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9077

Amount of Each Receipt this Period

81.00

Payroll Deduction (\$27,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

141.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Justin Hunter

Mailing Address 5221 42nd Street NW

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

VP Government and Regulatory Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9078

Amount of Each Receipt this Period

120.00

Payroll Deduction (\$40,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

Barbara Jacobsmeyer

Mailing Address 3908 Herman's Lake Ct

City

Florissant

State

MO

Zip Code

63034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9080

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

Robert F. Jernigan

Mailing Address 1220 Greensward Drive

City

Tallahassee

State

FL

Zip Code

32312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9028

Amount of Each Receipt this Period

75.00

Payroll Deduction (\$25,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

225.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Gregory M. Johnston

Mailing Address 840 Gardener Road

City

Rockledge

State

FL

Zip Code

32955

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Director of Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.9145

Amount of Each Receipt this Period

20.00

Payroll Deduction (\$10,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

Jill Jordan

Mailing Address 443 Lee Road 2099

City

Phenix City

State

AL

Zip Code

36870

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9081

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

Sylvia Kelly

Mailing Address 51 Paa-Ko Drive

City

Sandia Park

State

NM

Zip Code

87047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9029

Amount of Each Receipt this Period

45.00

Payroll Deduction (\$15,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

95.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Ardith Kiely

Mailing Address PO Box 9467

City

Newport Beach

State

CA

Zip Code

92658

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Healthsouth

Occupation

Pharmacy Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9082

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

David Klementz

Mailing Address 808 Parkview Circle

City

Birmingham

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

CFO - Inpatient Division

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1334.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9083

Amount of Each Receipt this Period

174.00

Payroll Deduction (\$58,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

Thomas Langle

Mailing Address 1203 Elm Drive

City

Alabaster

State

AL

Zip Code

35007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Healthsouth

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9086

Amount of Each Receipt this Period

150.00

Payroll Deduction (\$50,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

354.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Carol Lynne Lee

Mailing Address 1811 Martin St So

City

State

Zip Code

Pell City

AL

35128

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Director of Risk Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
11 / 19 / 2008

Transaction ID: SA11AI.9087

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

Robert Leech

Mailing Address 8945 Evening Grove Cr

City

State

Zip Code

Cordova

TN

38018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

VP, Home Health Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

MM / DD / YYYY  
11 / 19 / 2008

Transaction ID: SA11AI.9088

Amount of Each Receipt this Period

60.00

Payroll Deduction (\$20,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

Phillip E. Loggins

Mailing Address 5022 McLaughlin Drive

City

State

Zip Code

Tallahassee

FL

32309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Director of Risk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

MM / DD / YYYY  
11 / 19 / 2008

Transaction ID: SA11AI.9031

Amount of Each Receipt this Period

45.00

Payroll Deduction (\$15,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

135.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Terry R Maxhimer

Mailing Address 4817 Wood Springs Ln

City

Birmingham

State

AL

Zip Code

35226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

SVP Inpatient Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1725.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9090

Amount of Each Receipt this Period

225.00

Payroll Deduction (\$75,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

Denise B. McGrath

Mailing Address 222 River Walk Drive

City

Melbourne Beach

State

FL

Zip Code

32951

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9032

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

Wanda Morales

Mailing Address 309 Chapelwood Drive

City

Dothan

State

AL

Zip Code

36303

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Director of Quality

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9092

Amount of Each Receipt this Period

60.00

Payroll Deduction (\$20,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

315.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Ed Mowen

Mailing Address 8613 Highlands Drive

City

Trussville

State

AL

Zip Code

35173

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Regional Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9093

Amount of Each Receipt this Period

45.00

Payroll Deduction (\$15,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

Sandra Murvin

Mailing Address 1831 28th Ave South  
Suite 330

City

Birmingham

State

AL

Zip Code

35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9094

Amount of Each Receipt this Period

90.00

Payroll Deduction (\$30,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

Martin O'Neil

Mailing Address 11853 104th Lane North

City

Largo

State

FL

Zip Code

33773

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Director of Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9033

Amount of Each Receipt this Period

75.00

Payroll Deduction (\$25,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

210.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Patricia Ostaszewski

Mailing Address 54 Bay Way Drive

City State Zip Code  
 Brick NJ 08723

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HealthSouth

Occupation  
VP Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9095

Amount of Each Receipt this Period

75.00

Payroll Deduction (\$25,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

Shawn Patzkowsky

Mailing Address 133 Narrows Peak Circle

City State Zip Code  
 Birmingham AL 35242

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HealthSouth

Occupation  
Director of Income Tax Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9096

Amount of Each Receipt this Period

60.00

Payroll Deduction (\$20,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

Gary Payne

Mailing Address 2401 N Slick Rock

City State Zip Code  
 Columbia MO 65202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HealthSouth Corporation

Occupation  
Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9097

Amount of Each Receipt this Period

60.00

Payroll Deduction (\$20,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

195.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Doni Y. Phillips

Mailing Address 5816 Winchester

City

Texarkana

State

TX

Zip Code

75503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Healthsouth Corporation

Occupation

Director of Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9034

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

Troy Powell

Mailing Address 103 History Lane

City

Summerville

State

SC

Zip Code

29485

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Healthsouth

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9098

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

Mark J Rice

Mailing Address 182 Jill Loop

City

Ruston

State

LA

Zip Code

71270

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9099

Amount of Each Receipt this Period

45.00

Payroll Deduction (\$15,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

105.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

James H Rogers

Mailing Address 84 Downing Street

City

Columbia

State

SC

Zip Code

29209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9100

Amount of Each Receipt this Period

90.00

Payroll Deduction (\$30,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

Joanne Rose

Mailing Address 750 Barkman Creek Road

City

Hooks

State

TX

Zip Code

75561

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9037

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

Jim Simpson

Mailing Address 4285 Lexie Circle

City

Trussville

State

AL

Zip Code

35173

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

836.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9102

Amount of Each Receipt this Period

114.00

Payroll Deduction (\$38,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

234.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Lee A. Simpson

Mailing Address 4114 Medical Drive

City

San Antonio

State

TX

Zip Code

78229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9040

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

Michele M Skripps

Mailing Address 204 Lyttleton Way

City

Anderson

State

SC

Zip Code

29621

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9103

Amount of Each Receipt this Period

60.00

Payroll deduction (\$20,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

James Steinkirchner

Mailing Address 112 Wonderly Drive

City

Sarver

State

PA

Zip Code

16055

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Regional Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9105

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

120.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Darla Summerville

Mailing Address 219 Piper Street

City

Lilly

State

PA

Zip Code

15938

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Director of Case Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9106

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

Mark J Tarr

Mailing Address 1039 Williams Trace

City

Birmingham

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

President - Inpatient Division

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9108

Amount of Each Receipt this Period

345.00

Payroll Deduction (\$115, 2  
weeks)

**C.**

Full Name (Last, First, Middle Initial)

Curtis H. Traylor

Mailing Address 3307 Waters Edge

City

Manvel

State

TX

Zip Code

77578

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth Corporation

Occupation

Director of Pharmacy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9042

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

405.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Sandra Kaye Vollman

Mailing Address 2908 Glenstone Circle

City

Birmingham

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Senior VP Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9109

Amount of Each Receipt this Period

120.00

Payroll Deduction (\$40,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

John Whittington

Mailing Address 2716 Watkins Glen Drive

City

Birmingham

State

AL

Zip Code

35216

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2875.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9112

Amount of Each Receipt this Period

375.00

Payroll Deduction (\$125, 2  
weeks)

**C.**

Full Name (Last, First, Middle Initial)

Linda Masone Wilder

Mailing Address 2335 Ridge Trail

City

Birmingham

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Senior VP Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

874.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9113

Amount of Each Receipt this Period

114.00

Payroll Deduction (38, 2  
weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

609.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Traci Leann Willis

Mailing Address 8147 Fleets Run Dr

City

Memphis

State

TN

Zip Code

38018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9114

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

Arthur E Wilson, Jr.

Mailing Address 5947 South Shades Crest Rd

City

Bessemer

State

AL

Zip Code

35022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Senior VP Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1769.16

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9115

Amount of Each Receipt this Period

230.76

Payroll Deduction (\$76.92,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

Chris Winchester

Mailing Address 384 Greystone Glen Circle

City

Birmingham

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Director of Compensation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9116

Amount of Each Receipt this Period

75.00

Payroll Deduction (\$25,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

335.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 28 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Robert M Wisner

Mailing Address 1020 Eagle Lake Circle

City

Birmingham

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9117

Amount of Each Receipt this Period

75.00

Payroll Deduction (\$25,  
2 weeks)

**B.**

Full Name (Last, First, Middle Initial)

William Wittig

Mailing Address 656 Bluff Park Road

City

Hoover

State

AL

Zip Code

35226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Director, Contract Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9118

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

Daniel B Woloszyn

Mailing Address 937 Angle Tarn

City

West Dundee

State

IL

Zip Code

60118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation

Healthcare Facility Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9119

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

135.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

John Workman

Mailing Address 7054 North Highfield Dr

City

Birmingham

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9120

Amount of Each Receipt this Period

450.00

Payroll Deduction (\$150, 2  
weeks)

**B.**

Full Name (Last, First, Middle Initial)

Russell Yeager

Mailing Address 628 Springbank Terrace

City

Birmingham

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation  
VP Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9121

Amount of Each Receipt this Period

57.00

Payroll Deduction (\$19,  
2 weeks)

**C.**

Full Name (Last, First, Middle Initial)

Wendy Zimmerman

Mailing Address 7465 Rolling Bend Court

City

Columbus

State

GA

Zip Code

31904

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthSouth

Occupation  
Director of Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.9123

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$10,  
2 weeks)

**SUBTOTAL** of Receipts This Page (optional) .....

537.00

**TOTAL** This Period (last page this line number only) .....

6652.76

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

HealthSouth Corporation Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
KENDRICK MEEK CAMPAIGN FOR CONGRESS

Mailing Address 111 NW 183rd Street  
Suite 325

City State Zip Code  
Miami FL 33169

Purpose of Disbursement

Candidate Name  
KENDRICK B MEEK

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 17

Transaction ID: SB23.9147

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

**B.** Full Name (Last, First, Middle Initial)  
MCCONNELL SENATE COMMITTEE '08

Mailing Address PO BOX 1496

City State Zip Code  
LOUISVILLE KY 40201

Purpose of Disbursement

Candidate Name  
MITCH MCCONNELL

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: KY District: 00

Transaction ID: SB23.9152

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

**C.** Full Name (Last, First, Middle Initial)  
PEOPLE FOR ENGLISH

Mailing Address PO BOX 1940

City State Zip Code  
ERIE PA 16507

Purpose of Disbursement

Candidate Name  
PHILIP S ENGLISH

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 03

Transaction ID: SB23.9146

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

4500.00